

## B.2. Application Form for Consideration of a Plan or Project

The Delta Reform Act creates the Delta Stewardship Council (Council) as an independent agency of the state (Wat. Code §85200). SBX7 1 (effective February 3, 2010) gives the Council several responsibilities, many linked to a comprehensive “Delta Plan,” which the Council is charged to develop, adopt, and commence implementation of by January 1, 2012. The Council is also charged with developing an Interim Plan “...that includes recommendations for early actions, projects, and programs” (Wat. Code § 85084). The Council has set August 27, 2010, as the date for adoption of the Interim Plan. The Council uses the framework established in the Interim Plan to make recommendations based on its responsibilities under SBX7 1. After the Delta Plan is adopted, the Council decisions will become determinative.

### 1. Applicant Information

**Request:** Consideration as an early action: Instream Flow Studies Schedule and Costs to Legislature

Consultation re plan: \_\_\_\_\_

Consultation re: possible covered action: \_\_\_\_\_

Other (please specify): \_\_\_\_\_

**Applicant Name:**

State Water Resources Control Board

Legal status (city, special district, firm, individual, etc.): \_\_\_\_\_

Address of applicant:

\_\_\_\_\_

Contact information: Name of responsible individual:

Leslie Grober

Role (officer, attorney, etc.): Program Manager

Address: 1001 I Street Sacramento, CA 95814

Email: lgrober@waterboards.ca.gov

Telephone: 916-341-5428

**Legally Responsible Entity Name (if different than Applicant):**

Legal status (city, special district, firm, individual, etc.):

Address of applicant:

Contact information: Name of responsible individual:

Role (officer, attorney, etc.):

Address:

Email:

Telephone:

**Plan or project purpose narrative, including legal authority. If an action is “urgent,” provide the rationale for urgency.**

Required per Water Code Section 85087

**Plan or project physical location and description (include geo-referencing latitude and longitude for projects):**

The Delta Watershed and Statewide

## **2. Plan or Project Review by Public Agencies**

**Local Government Discretionary Approval(s):**

Yes \_\_\_\_\_ No ☒ If yes, describe: \_\_\_\_\_

**Delta Protection Commission Consistency Approval(s):**

Yes \_\_\_\_\_ No ☒ If yes, describe: \_\_\_\_\_

**Bay Conservation and Development Commission Permit:**

Yes \_\_\_\_\_ No ☒ If yes, describe: \_\_\_\_\_

**State Lands Commission:**

Yes \_\_\_\_\_ No ☒

- 1 **CalTrans:**
- 2 Yes \_\_\_\_\_ No X
- 3 **State Water Resources Control Board Permit:**
- 4 Yes \_\_\_\_\_ No X
- 5 **Regional Water Quality Control Board:**
- 6 Yes \_\_\_\_\_ No X Regional Board Number: \_\_\_\_\_
- 7 **California Dept. of Toxic Substances Control:**
- 8 Yes \_\_\_\_\_ No X
- 9 **California Department of Fish and Game Streambed Alteration Permit:**
- 10 Yes \_\_\_\_\_ No X
- 11 **DF&G Take Authorization:**
- 12 Yes \_\_\_\_\_ No X
- 13 **Other DF&G Permit:**
- 14 Yes \_\_\_\_\_ No X
- 15 **U.S. Army Corps of Engineers:**
- 16 Yes \_\_\_\_\_ No X Public Notice Number: \_\_\_\_\_
- 17 **U.S. Fish and Wildlife Service: Take Authorization**
- 18 Yes \_\_\_\_\_ No X
- 19 **Biological Opinion:**
- 20 Yes \_\_\_\_\_ No X
- 21 **NOAA Fisheries Service: Take Authorization**
- 22 Yes \_\_\_\_\_ No X
- 23 **Biological Opinion**
- 24 Yes \_\_\_\_\_ No X
- 25 **U.S. Coast Guard:**

1 Yes \_\_\_\_\_ No <sup>x</sup>\_\_\_\_\_

2 **Federal Funding:**

3 Yes \_\_\_\_\_ No <sup>x</sup>\_\_\_\_\_

4 **Describe any history of consideration by any other governmental agency and provide documentation**  
5 **of any actions taken.**

6 none

7 \_\_\_\_\_

8

9 **3. Environmental Impact Documentation (must be completed**  
10 **by all applicants)**

11 **a.** Is the project statutorily or categorically exempt from the need to prepare any environmental  
12 documentation?

13 Yes \_\_\_\_\_ No not applicable

14 If “Yes,” please attach a statement that identifies and supports this statutory or categorical exemption.

15 **b.** Has a government agency other than the Council, serving as the lead agency, adopted a negative  
16 declaration or certified an environmental impact report or environmental impact statement on the  
17 project?

18 Yes \_\_\_\_\_ No <sup>x</sup>\_\_\_\_\_

19 If “Yes,” attach a copy of the document. If the environmental impact report or statement is longer than  
20 ten pages, also provide a summary of up to ten pages. If “No,” provide sufficient information to allow  
21 the Council to make the necessary findings regarding all applicable policies. The certified document  
22 must be submitted prior to action on the application.

23 **4. Assessment against Delta Reform Act Policy Objectives**

24 Assess the proposed plan or project against the eight policy objectives listed below which “the  
25 legislature declares are inherent in the coequal goals for management of the Delta” (WC Section 85020).  
26 Provide a brief summary for the rationale for each assessment and reference to any supporting  
27 documentation (include URL links as appropriate).

28 **(a) Manage the Delta’s water and environmental resources and the water resources of the state**  
29 **over the long term.**

30 Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown \_\_\_\_\_ ~~\_\_\_\_\_ Not Applicable~~ <sup>x</sup>

31 Rationale, magnitude of effect (if positive or negative) and documentation:

32 \_\_\_\_\_  
33 \_\_\_\_\_

**(b) Protect and enhance the unique cultural, recreational, and agricultural values of the California Delta as an evolving place.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(c) Restore the Delta ecosystem, including its fisheries and wildlife, as the heart of a healthy estuary and wetland ecosystem.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(d) Promote statewide water conservation, water use efficiency, and sustainable water use.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(e) Improve water quality to protect human health and the environment consistent with achieving water quality objectives in the Delta.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(f) Improve the water conveyance system and expand statewide water storage.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(g) Reduce risks to people, property, and state interests in the Delta by effective emergency preparedness, appropriate land uses, and investments in flood protection.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

**(h) Establish a new governance structure with the authority, responsibility, accountability, scientific support, and adequate and secure funding to achieve these objectives.**

Positive \_\_\_\_\_ Negative \_\_\_\_\_ Neutral \_\_\_\_\_ Unknown \_\_\_\_\_ Not Applicable x

Rationale, magnitude of effect (if positive or negative) and documentation:

## 5. Assessment of Administration and Implementation Processes

**Cost of Project/Plan:** Please provide your best estimate of the total cost of the project or plan you are proposing. If this is a Plan, please provide an estimate of the annual operational or enforcement costs projected for the activity. Please list all sources used for developing the cost estimates

\$20,000.00 to prepare the report

**Financing (provide information on public and private sources of funding, including funds on hand or legally pledged or obligated and the sources of those funds):**

none

**Identify any public agencies (federal, state and local) whose actions or decisions are essential for the proposed action to succeed. Provide evidence of their approval and support of the proposed action:**

none

**If real property must be acquired or use altered for the success of the proposed action, identify the owners of that property and information on how ownership or use change will occur:**

not applicable

**Provide a time line for the proposed plan or project, including major milestones through completion:**

Report will be transmitted to the Legislature by 12/31/10

1 **Describe how success or failure of the plan or project will be determined, including measures**  
2 **proposed, time frame and public agency responsible for judging success:**

3 not applicable

5 **Describe the major benefits that can result from the proposed plan or project, including identification**  
6 **of beneficiaries and any information on the magnitude and timing of benefits received:**

7 Report provides information to the Legislature and others regarding the priority and costs to conduct instream flow studies for priority rivers and streams in the Delta Watershed and statewide

9 **If the proposed plan or project fails, what is done? What additional costs could be incurred and how**  
10 **will they be financed? Identify any lasting effects or changed options for future policy making:**

11 not applicable

14 **6. Scientific justification (to address requirement for Council**  
15 **use of best available science, Water Code section 85302(g)):**

16 **Describe any Attach description of scientific justification for the proposed plan or project and provide**  
17 **all related documents any pertinent documents. Address the criteria identified in Section 3 when**  
18 **preparing the scientific justification. Provide complete list of all scientific references cited+.**

19 not applicable

25 **7. Applicant certifications and authorizations**

26 I certify that all of the information submitted is complete and accurate to the best of my knowledge and  
27 that all attached exhibits are full, complete and correct. I certify that I understand that omitted or  
28 insufficient information can delay consideration of this application. I certify that this application is not  
29 complete until accepted by the Council at a regularly scheduled meeting. I authorize the Council, its staff  
30 or other authorized personnel to share this information publicly and authorize their collection of  
31 additional information relevant to this application.

32 ORIGINAL SIGNED BY

9/3/2010

33 Signature of applicant or applicant's representative

Date

34 Printed name: Leslie Grober

Title: Manager, Hearings and Special Programs